



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

**\*BIBDATASHEET\***

CONFIRMATION NO. 6885

Bib Data Sheet

|                             |                                       |              |                        |                                     |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER<br>10/665,488 | FILING DATE<br>09/22/2003<br><br>RULE | CLASS<br>092 | GROUP ART UNIT<br>3745 | ATTORNEY DOCKET<br>NO.<br>P69064US0 |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|

## APPLICANTS

Leonhard Weixler, Thierhaupten, GERMANY;

## \*\* CONTINUING DATA \*\*\*\*\*

2 NONE

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

GERMANY 102 43 744.0 09/20/2002 2 Yes

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/12/2003

|   |          |         |        |             |
|---|----------|---------|--------|-------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  | GERMANY  | 2       | 10     | 1           |

## ADDRESS

00136  
JACOBSON HOLMAN PLLC  
400 SEVENTH STREET N.W.  
SUITE 600  
WASHINGTON, DC  
20004

## TITLE

Displacement device

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>750 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------------|---|---|